### AMENDED IN ASSEMBLY APRIL 15, 1996

CALIFORNIA LEGISLATURE—1995-96 REGULAR SESSION

## ASSEMBLY BILL

No. 2374

# **Introduced by Assembly Member Bates**

February 16, 1996

An act to amend Section 14087.35 of the Welfare and Institutions Code, relating to Medi-Cal add Chapter 5 (commencing with Section 101850) to Part 4 of Division 101 of the Health and Safety Code, relating to public health.

#### LEGISLATIVE COUNSEL'S DIGEST

AB 2374, as amended, Bates. Medi-Cal: Alameda County: hospital authority.

Existing law provides for the Medi-Cal program, administered by the State Department of Health Services, under which qualified low-income persons are provided with health care services.

Existing law permits the County of Alameda to establish a health authority as a means of establishing the local initiative component of the state-mandated two-plan managed care model for the delivery of Medi-Cal services.

This bill would make technical nonsubstantive changes to these provisions authorize the Board of Supervisors of the County of Alameda to establish, by ordinance, a hospital authority to manage, administer, or control the Alameda County Medical Center, as deemed appropriate by the board. The bill would set forth certain rights and duties, powers, and

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requirements of a hospital authority established under its provisions.

Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.

The people of the State of California do enact as follows:

# SECTION 1. Section 14087.35 of the Welfare and SECTION 1. Chapter 5 (commencing with Section 101850) is added to Part 4 of Division 101 of the Health and Safety Code, to read:

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#### CHAPTER 5. Alameda County Medical Center HOSPITAL AUTHORITY

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101850. The Legislature finds declares and following:

- 10 (a) (1) Due to the challenges facing the Alameda 12 County Medical Center arising from changes in the 13 public and private health industries, the Alameda County 14 Board of Supervisors has determined that a transfer of 15 governance of the Alameda County Medical Center to an 16 independent governing body is needed to improve the efficiency, effectiveness, and economy of the community 17 18 health services provided at the medical center. The board 19 of supervisors has further determined that the creation of 20 an independent hospital authority strictly and exclusively 21 dedicated to themanagement, administration, 22 control of the medical center is the best way to fulfill its 23 commitment to the medically indigent, special needs, general populations of Alameda County. 25 accomplish this, it is necessary that the board of supervisors be given authority to create a hospital 27 authority. Because there is no general law under which 28 this authority could be formed, the adoption of a special act and the formation of a special authority is required.
- (2) The following definitions shall apply for purposes 31 *of this section:* 
  - (A) "The county" means the County of Alameda.

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(B) "Governing board" means the governing body of the health authority.

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- (C) "Health authority" means the separate public agency established by the Board of Supervisors of Alameda County to manage, administer, or control the Alameda County Medical Center, as deemed appropriate by the board of supervisors.
- (D) "Medical center" means the Alameda County Medical Center.
- (b) The board of supervisors of the county may, by ordinance, establish a hospital authority separate and apart from the county for the purpose of effecting a 13 transfer of the management, administration, or control of 14 the medical center as deemed appropriate by the board of supervisors. A hospital authority established pursuant 16 to this chapter shall be strictly and exclusively dedicated to the management, administration, and control of the 18 medical center within in parameters set forth in this chapter, and in the ordinance, bylaws, and contracts adopted by the board of supervisors which shall not be in conflict with this chapter.
- 22 (c) A hospital authority established pursuant to this 23 chapter shall be governed by a board that is appointed, 24 both initially and continually, by the Board of Supervisors 25 of the County of Alameda. This hospital authority governing board shall reflect both the expertise necessary to maximize the quality and scope of care at the medical 28 center in a fiscally responsible manner and the diverse interest that the medical center serves. The enabling ordinance shall specify the membership of the hospital governing board, the qualifications authority of 32 individual members. themanner appointment. selection, or removal of governing board members, their 34 terms of office, and all other matters that the board of 35 supervisors deems necessary or convenient for 36 conduct of the hospital authority's activities. enabling ordinance shall provide that persons who are 37 38 current providers of care or who are employed by a current provider of care doing business in the county and

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persons who are not residents of the county are not eligible for service on the governing board.

- (d) The mission of the hospital authority shall be the management, administration, or other control. determined by the board of supervisors, of the group of public hospitals, clinics, and programs that comprise the medical center, in a manner that ensures appropriate, quality, and cost effective medical care for medically indigent residents of the county as required of counties by 10 Section 17000 of the Welfare and Institutions Code, and. to the extent feasible, the uninsured, the underinsured, and other populations in Alameda County. The mission shall be pursued, to the extent feasible, through primary, 14 secondary, and tertiary care, inpatient and outpatient health education. medical research. services. 16 promotional health programs.
- (e) The board of supervisors shall adopt bylaws for the 18 medical center that sets forth those matters, related to the operation of the medical center by the hospital authority, 20 that the board of supervisors deems necessary and appropriate. The bylaws shall become operative upon approval by a majority vote of the board of supervisors. Any changes or amendments to the bylaws shall be by majority vote of the board of supervisors.
- (f) The hospital authority created and appointed 26 pursuant to this section is a duly constituted governing body within the meaning of Section 1250 and Section 70035 of Title 22 of the California Code of Regulations as currently written or subsequently amended.
- otherwise provided by the (g) Unless board supervisors by way of resolution, the hospital authority is empowered, or the board of supervisors is empowered on behalf of the hospital authority, to apply as a public 34 agency for one or more licenses for the provision of health care pursuant to statutes and regulations governing 36 licensing as currently written or subsequently amended.
  - (h) In the event of a change of license ownership, the governing body of the hospital authority shall comply with the obligations of governing bodies of general acute care hospitals generally as set forth in Section 70701 of

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Title 22 of the California Code of Regulations, as currently written or subsequently amended, as well as the terms and conditions of the license. The hospital authority shall 4 be the responsible party with respect to compliance with 5 these obligations, terms, and conditions.

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- (i) (1) Any transfer the administration, management, or control of the medical center, whether or not the transfer includes the surrendering by the county of the existing general acute care hospital license 10 and corresponding application for a change of ownership of the license, shall not affect the eligibility of the county, or in the case of a change of license ownership, the hospital authority, to do any of the following:
- (A) Participate in, and receive allocations pursuant to, 15 the California Healthcare for the Indigent Program 16 (CHIP).
- supplemental reimbursements from (B) Receive 18 Emergency Services and Supplemental Payments Fund created pursuant to Section 14085.6 of the Welfare and Institutions Code.
- (C) Receive appropriations from the Medi-Cal 22 Inpatient Payment Adjustment Fund without relieving 23 the county of its obligation to make intergovernmental 24 transfer payments related to the Medi-Cal Inpatient 25 Payment Adjustment Fund pursuant to Section 14163 of the Welfare and Institutions Code.
  - (D) Receive Medi-Cal capital supplements pursuant to Section 14085.5 of the Welfare and Institutions Code.
  - (2) Any transfer described in paragraph (1) shall not otherwise disqualify the county, or in the case of a change in license ownership, thehospital authority, participating in any of the following:
- (A) Other funding sources either specific to county 34 hospitals or county ambulatory care clinics or for which 35 there are special provisions specific to county hospitals or 36 to county ambulatory care clinics.
- (B) Funding programs in which the county, on behalf 38 of the medical center and the Alameda County Health Care Services Agency, had participated prior to the creation of the hospital authority, or would otherwise be

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qualified to participate in had the hospital authority not created, and administration, management, 3 control not been transferred by the county to the hospital authority, pursuant to this chapter.

- (j) A hospital authority created pursuant to 6 chapter shall be a public agency and government entity separate and apart from the county, and shall not be considered to be an agency, division, department, or instrumentality of the county. The hospital authority shall 10 not be governed by, nor be subject to, the charter of the county and shall not be subject to policies or operational 12 rules of the county, including, but not limited to, those 13 relating to personnel and procurement. As a legal entity 14 separate and apart from the county, the hospital authority 15 shall file the statement required by Section 53051 of the 16 Government Code.
- (k) (1) Any contract executed by and between the 18 county and the hospital authority shall provide that 19 liabilities or obligations of the hospital authority with 20 respect to its activities pursuant to the contract shall be 21 the liabilities or obligations of the hospital authority, and shall not become the liabilities or obligations of the county.
- (2) Any liabilities or obligations of the hospital 25 authority with respect to the liquidation or disposition of 26 the hospital authority's assets upon termination of the hospital authority shall not become the liabilities or obligations of the county.
- (3) Any obligation of the hospital authority, statutory, contractual, or otherwise, shall be the obligation solely of the hospital authority and shall not be the obligation of 32 the county or the state.
- (l) (1) Notwithstanding the foregoing, any transfer of 34 the administration, management, or assets of the medical 35 center, whether or not accompanied by a change in 36 licensing, shall not relieve the county of the ultimate responsibility for indigent care pursuant to Section 17000 of the Welfare and Institution Code.
- (2) Any contract executed by and between the county 39 40 thehospital authority shall provide for

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indemnification of the county by the hospital authority for liabilities as specifically set forth in the contract.

(3) Indemnification by the hospital authority shall not be construed as divesting the county from its ultimate responsibility for compliance with Section 17000 of the Welfare and Institutions Code.

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- (m) Notwithstanding the provisions of this section relating to the obligations and liabilities of the hospital authority, a transfer of control or ownership of the 10 medical center shall confer onto the hospital authority all the rights and duties set forth in state law with respect to hospitals owned or operated by a county.
- (n) (1) A transfer of the maintenance, operation, and 14 management or ownership of the medical center to the 15 hospital authority shall comply with the provisions of 16 Section 14000.2 of the Welfare and Institutions Code, in that the transfer shall be accompanied by a finding that 18 the community services provided by the medical center could be more efficiently, effectively, or economically provided by the hospital authority than by the county.
- (2) A transfer of control or ownership to the hospital authority may be made with or without the payment of a purchase price by the hospital authority and otherwise 24 upon the terms and conditions that the parties may 25 mutually agree, which terms and conditions shall include 26 those found necessary by the board of supervisors to ensure that the transfer will constitute an ongoing material benefit to the county and its residents.
- (3) A transfer of the maintenance, operation, 30 management to the hospital authority shall not construed as empowering the hospital authority 32 transfer any ownership interest of the county in the medical center except as otherwise approved by 34 board of supervisors.
- (o) The board of supervisors shall retain control over 36 the use of the medical center physical plant and facilities except as otherwise specifically provided for in lawful agreements entered into by the board of supervisors. Any lease agreement or other agreement between the county and the hospital authority shall provide that county

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premises shall not be sublet without the approval of the board of supervisors.

- (p) The statutory authority of a board of supervisors to prescribe rules that authorize a county hospital to 5 integrate its services with those of other hospitals into a 6 system of community service that offers free choice of 7 hospitals to those requiring hospital care, as set forth in 8 Section 14000.2 of the Welfare and Institutions Code, shall apply to the hospital authority upon a transfer of control 10 or ownership of the medical center by the county to the hospital authority.
- (q) The hospital authority shall have the power to 13 acquire and possess real or personal property and may 14 dispose of real or personal property other than that 15 owned by the county, as may be necessary for the 16 performance of its functions. The hospital authority shall 17 have the power to sue or be sued, to employ personnel, 18 and to contract for services required to meet obligations.
- (r) Any agreement between the county 21 hospital authority shall provide that all existing services 22 provided by the medical center continue to be provided 23 to the county through the medical center subject to the availability of funds and policy of the county.
- (s) A hospital authority to which the administration, 25 26 management, or control of the medical transferred shall be a "district" within the meaning set 28 forth in the County Employees Retirement Law of 1937 29 (Chapter 3 (commencing with Section 31450) of Part 3 of 30 Division 4 of Title 3 of the Government Code). Therefore, employees of a hospital authority are eligible to 32 participate in the County Employees Retirement System 33 to the extent permitted by law.
- 34 (t) Members of the governing board of the hospital 35 authority shall not be vicariously liable for injuries caused 36 by the act or omission of the hospital authority or advisory 37 body to the extent that protection applies to members of 38 governing boards of local public entities generally under Section 820.9 of the Government Code.

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(u) The hospital authority shall be a public agency subject to the Myers-Milias-Brown Act (Chapter 10 (commencing with Section 3500) of Division 4 of Title 1 of the Government Code).

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- (v) Any transfer of functions from 6 classifications to a hospital authority established pursuant to this section shall result in the recognition by the hospital authority of the employee organization that represented the classifications performing those 10 functions at the time of the transfer.
- (w) (1) In exercising its powers to employ personnel, as set forth in subdivision (p), the hospital authority shall implement, and the board of supervisors shall adopt, a 14 personnel transition plan. The personnel transition plan shall require all of the following:
- communications (A) Ongoing employees to and recognized employee organizations regarding the 18 impact of the transition on existing medical center employees and classifications.
- (B) Meeting and conferring on the issue of the timeframe for which the transfer of personnel shall occur. The timeframe shall be subject to modification by the 23 board of supervisors as appropriate, but in no event shall it exceed one year from the effective date of transfer of governance from the board of supervisors to the hospital authority.
- (C) Meeting and conferring on the issue of a specified 28 period of time during which employees of the county impacted by the transfer of governance may elect to be appointed to vacant positions with the Alameda County Health Care Services Agency for which they have tenure.
- (D) Meeting and conferring on the issue of a specified period of time during which employees of the county 34 impacted by the transfer of governance may elect to be considered for reinstatement into positions 36 county for which they are qualified and eligible.
  - conferring (E) Meeting and on theissue compensation for vacation leave and compensatory leave accrued while employed with the county in a manner that grants affected employees the option of either

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transferring balances or receiving compensation to the degree permitted employees laid off from service with 3 the county.

- (F) Meeting and conferring on the issue of a transfer of sick leave accrued while employed with the county to hospital authority employment.
- (G) Meeting and conferring on the issue of the recognition by the hospital authority of service with the county in determining the rate at which vacation accrues.
- (H) Meeting and conferring on the issue of the 11 possible preservation of seniority, pensions, applicable accrued benefits, and other benefits employees of the county impacted by the transfer of governance.
- (2) Nothing in this subdivision shall be construed as 16 prohibiting the hospital authority from determining the number of employees, the number of full-time equivalent 18 positions, the job descriptions, and the nature and extent of classified employment positions.
  - (3) Employees of the hospital authority are public employees for purposes of Division 3.6 (commencing with Section 810) of Title 1 of the Government Code relating to claims and actions against public entities and public employees.
- (x) Any hospital authority to which this section applies 26 shall be bound by the terms of the memorandum of understanding executed by and between the county and 28 health care and management employee organizations that is in effect as of the date this legislation becomes 30 operative in the county. Upon the expiration of the memorandum of understanding, the hospital authority shall negotiate subsequent memoranda of understanding with appropriate employee organizations.
- (y) The hospital authority created pursuant to this 35 section may borrow from the county and the county may 36 lend the hospital authority funds or issue revenue anticipation notes to obtain those funds necessary to commence operations. The hospital authority, as a public entity, may issue revenue bonds without voter approval. The revenue bonds be exempt from income 40 shall

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taxation. This section shall not preclude the county from issuing revenue bonds to finance capital improvements of the medical center facilities.

(z) The hospital authority shall be subject to state and federal taxation laws that are applicable to counties generally.

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- (aa) The hospital authority, the county, or both, may engage in marketing, advertising, and promotion of the medical and health care services made available to the 10 community at the medical center.
- (bb) The hospital authority shall not be a "person" subject to suit under the Cartwright Act (Chapter 2 (commencing with Section 16700) of Part 2 of Division 7 14 of the Business and Professions Code).
- (cc) Notwithstanding any provision of law to the 16 contrary, a member of the governing board of the hospital authority shall be deemed not to be interested in 18 a contract entered into by the hospital authority within the meaning of Article 4 (commencing with Section 1090) of Chapter 1 of Division 4 of Title 1 of the Government Code.
  - (dd) Notwithstanding Chapter 7 (commencing Section 87100) of Title 9 of the Government Code related to conflicts of interest, a member of the governing board of the hospital authority may participate fully in the official decisions of the governing board, including, but limited decisions and to, policies reimbursements, budgetary and fiscal matters, allocation of funds, and determination of rates.
- 30 (ee) Notwithstanding 4.7 (commencing Article Section 1125) of Chapter 1 of Division 4 of Title 1 of the Government Code related to incompatible activities, no member of the governing board, no officer, and no 34 member of the hospital authority administrative staff 35 shall be considered to be engaged in36 inconsistent and incompatible with his or her duties as a governing board member, officer, or staff person as a 38 result of employment or affiliation with the county unless the employment or affiliation is with the medical center or a health provider or facility operated by the county.

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(ff) (1) The hospital authority may use acomputerized information management system in connection with the administration of the medical center.

- (2) Information maintained in the management 5 information system or in other filing and records maintenance systems that is confidential and protected by law shall not be disclosed except as provided by law.
- (3) The records of the hospital authority, whether 8 9 paper records, records maintained in the management 10 information system, or records in any other form, that relate to trade secrets or to payment rates or the thereof, or which relate 12 determination to contract 13 negotiations with providers of health care, shall not be 14 subject to disclosure pursuant to the California Public 15 Records Act (Chapter 5 (commencing with Section 6250) 16 of Division 7 of Title 1 of the Government Code). The transmission of the records, or the information contained 17 18 therein in an alternative form, to the board of supervisors constitute waiver of exemption from 19 shall a 20 disclosure, and the records and information transmitted shall be subject to this same exemption. The 21 22 information, if compelled pursuant to an order of a court of competent jurisdiction or administrative body in a 24 manner permitted by law, shall be limited to in-camera review, and shall not be shared with the parties to the 25 26 proceeding.
- (gg) (1) Notwithstanding other any law, the governing board may order that a meeting held solely for the purpose of discussion or taking action on hospital authority trade secrets, which has the same meaning as "health care facility trade secrets" as defined in 32 subdivision (c) of Section 32106, shall be held in closed session. The requirements of making a public report of actions taken in closed session and the vote or abstention of every member present may be limited to a brief description general devoid of the information constituting the trade secret.
- (2) The governing board may delete the portion or 38 39 portions containing trade secrets from any documents 40 that were finally approved in the closed session that are

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provided to persons who have made the timely or standing request.

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- (3) Nothing in this section shall be construed as preventing the governing board from meeting in closed session as otherwise provided by law.
- (hh) Open sessions of the hospital authority shall constitute official proceedings authorized by law within the meaning of Section 47 of the Civil Code. The privileges set forth in that section with respect to official 10 proceedings shall apply to open sessions of the hospital authority.
- (ii) The hospital authority shall be a public agency for 13 purposes of eligibility with respect to grants and other 14 funding and loan guarantee programs. Contributions to 15 the hospital authority shall be tax deductible to the extent 16 permitted by state and federal law. Nonproprietary income of the hospital authority shall be exempt from state income taxation.
- (jj) Contracts by and between the hospital authority 20 and the state and contracts by and between the hospital authority and providers of health care, goods, or services may be let on a nonbid basis and shall be exempt from 23 Chapter 2 (commencing with Section 10290) of Part 2 of 24 Division 2 of the Public Contract Code.
- (kk) (1) Provisions of theEvidence Code, the 26 Government Code, including the Public Records Act (Chapter 5 (commencing with Section 6250) of Division 28 7 of Title 1 of the Government Code), the Civil Code, the 29 Business and Professions Code, and other applicable law 30 pertaining to the confidentiality of peer review activities of peer review bodies shall apply to the peer review ofhospital authority. Peer activities the proceedings shall constitute an official proceeding 34 authorized by law within the meaning of Section 47 of the 35 Civil Code and those privileges set forth in that section 36 with respect to official proceedings shall apply to peer 37 review proceedings of the hospital authority. If the 38 hospital authority is required by law or contractual obligation to submit to the state or federal government 40 peer review information or information relevant to the

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credentialing of a participating provider, that submission shall not constitute a waiver of confidentiality. The laws pertaining to the confidentiality of peer review activities shall be together construed as extending, to the extent 5 permitted by law, the maximum degree of protection of confidentiality.

- (2) Notwithstanding any other law, Section 1461 shall apply to hearings on the reports of hospital medical audit or quality assurance committees as they relate to network 10 providers or applicants.
  - (ll) The hospital authority shall carry general liability insurance to the extent sufficient to cover its activities.

the event the board of supervisors 14 determines that the hospital authority should no longer 15 function for the purposes as set forth in this chapter, the 16 board of supervisors may, by ordinance, terminate the activities of the hospital authority and expire the hospital 18 authority as an entity.

(nn) A hospital authority which is created pursuant to 20 this section but which does not obtain the administration, management, or control of the medical center or which 22 has those duties and responsibilities revoked by the board 23 of supervisors shall not be empowered with the powers 24 enumerated in this section.

(00) The establishment of a hospital authority under 26 Article 2.7 (commencing with Section 14087.3) of the Welfare and Institutions Code shall be valid as if established pursuant to this section and this section shall apply to that hospital authority.

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All matter omitted in this version of the billappearsinthebillasintroducedinthe **Assembly, February 16, 1996 (JR 11)**